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11. *Deaths, burials, and transportation of the dead.*—When the body of anyone dead from acute anterior poliomyelitis is to be transported by railroad or other common carrier, the official rules of the State board of health governing the transportation of the dead must be observed.

STATUS OF POLIOMYELITIS IN NEW YORK CITY.

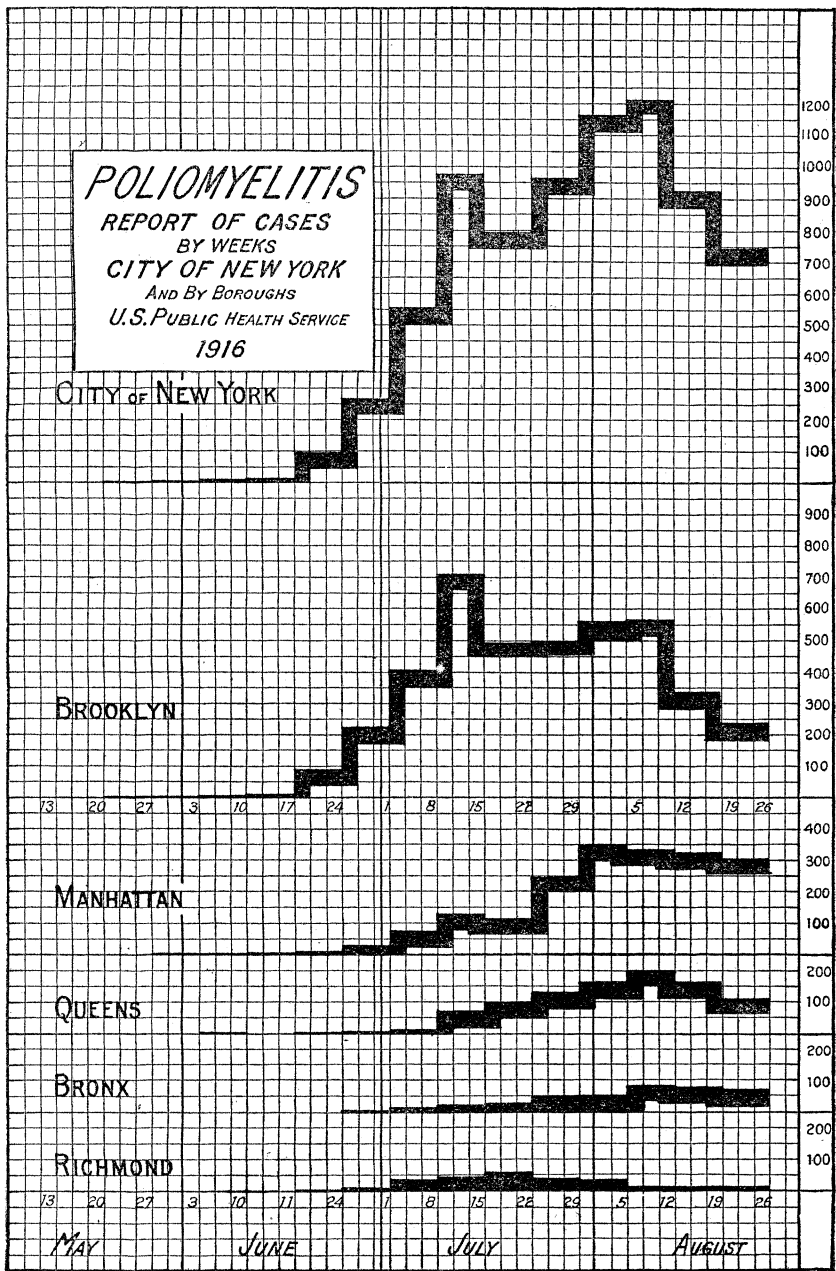
Report received from C. H. LAVINDER, Surgeon, United States Public Health Service.

The following brief notes (dated Aug. 26, 1916) are in continuation of previous reports. The statements made, however, are all provisional. It is as yet much too early to form definite conclusions or make final statements on the epidemic in New York City and its vicinity.

A study of the daily report of cases in Greater New York seems to indicate definitely that the epidemic is declining. If the reported cases are analyzed by weeks, it is seen that the highest number reported for Greater New York occurred in the week ended August 12, with a total of 1,210 cases. For the week ended August 26, which is the date of this report, this total has fallen to almost half that number. (See Table 1.)

If the figures for the various boroughs are examined by weeks, it will be noticed that in the Borough of Brooklyn, which was the first borough involved, the epidemic has been steadily declining for some time. The number of cases in the Borough of Richmond, which passed the crest in the third week of July, continued to fall until the week ended August 12, since which time it has remained stationary, some 15 cases being reported each week for the last three weeks. The population of this borough is the smallest population of all the boroughs and is approximately 100,000. The number of cases in the Borough of Queens did not reach its maximum until the week ended August 12, since which time it has declined, but not so markedly as in the Borough of Brooklyn. The number of cases reported in the Boroughs of The Bronx and of Manhattan, both of which reached their maximum about the same time, has shown only a modest decline. It is somewhat striking that while the general decline in the epidemic for the entire city seems quite evident, the number of cases reported in certain of the boroughs, although they have apparently passed the crest, still remains high.

The fatality rate for the entire city, calculated on total cases and total deaths, has shown some increase, and at this date is approximately 23.5 per cent. The fatality rates for the different boroughs are not given, since the data as collected would be somewhat misleading. The reason for this is that deaths are reported from the boroughs in which they occur and not from the boroughs in which they originate.



Tables are given (see Tables 2 and 3) with regard to age distribution by months and by boroughs. A glance at these tables serves to show what has been previously commented upon, that apparently the incidence in the higher age groups has increased somewhat with the advance of the epidemic. This is more especially evident in the age group 6-10 years. The total number of cases among adults has been comparatively small, and as usual, the mortality among these has been high.

Tables are given (see pp. 2410-2411) showing the occurrence of multiple cases in families affected. It will be noted that out of 7,000 cases, 6,748 families were involved. The number of families in which there occurred only one case is nearly 97 per cent of the total number of families involved. This is in accord with previous investigations of this disease.

TABLE 1.—*Polio-myelitis—Cases and deaths—Greater New York and boroughs.*¹

	Cases.						Total deaths for the city. ²
	Total for the city.	Brooklyn.	Manhattan.	Richmond.	Queens.	Bronx.	
Week ended—							
Aug. 12.....	1,210	568	334	16	203	89	297
Aug. 19.....	922	338	322	15	164	83	236
Aug. 26.....	743	235	307	15	110	76	212

¹ Continuation of table 1 published in Public Health Report Aug. 18, 1916, p. 2198.

² Deaths by boroughs not now available.

TABLE 2.—*Age distribution, poliomyelitis cases in New York City, by boroughs.*

	Under 1 year.		1-5 years.		6-10 years.		11-15 years.		Over 15 years.		Total, all ages. ¹
	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	Number.	Per cent.	
Manhattan.....	215	14.4	1,086	72.8	122	8.1	29	2.0	40	2.7	1,492
Bronx.....	40	10.0	297	73.9	52	12.9	8	2.0	5	1.2	402
Brooklyn.....	272	8.2	2,653	79.7	303	9.1	61	1.8	39	1.2	3,328
Queens.....	67	9.0	546	73.7	103	13.9	19	2.6	6	.8	741
Richmond.....	18	6.8	206	78.0	30	11.4	7	2.6	3	1.2	264
Total.....	612	9.8	4,788	76.9	610	9.8	124	2.0	93	1.5	6,227

¹ This compilation includes only cases reported up to Aug. 20, and figures for the last week of this period are incomplete.

TABLE 3.—*Age distribution, poliomyelitis cases in New York City, by months.*

	Total cases included.	Percentage distribution.						
		Under 1 year.	1-5 years.	6-10 years.	11-15 years.	Over 15 years.	Total over 5 years.	Total over 10 years.
May and June.....	787	10.9	81.6	5.1	1.5	0.9	7.5	2.4
July.....	3,410	8.3	78.2	9.9	2.2	1.4	13.5	3.6
August.....	2,030	12.0	72.8	11.5	1.8	1.9	15.2	3.7
Total.....	6,227	9.8	76.9	9.8	2.0	1.5	13.3	3.5

Occurrence of Multiple Cases of Poliomyelitis in Families Affected.

Data have been compiled from the records of the first 7,000 cases. A certain proportion of the cases included were of the so-called "abortive" type; that is, showing no definite paralysis, but with other symptoms or findings sufficient to justify a positive diagnosis of poliomyelitis.

These 7,000 cases occurred in 6,748 families, as follows:

	Families.	Cases.	Per cent of of total families.
1 case in family.....	6,521	6,521	96.63
2 cases in family.....	205	410	3.04
3 cases in family.....	20	60	.30
4 cases in family.....	1	4	.014
5 cases in family.....	1	5	.014
Total.....	6,748	7,000	99.998

DISTRIBUTION IN FAMILIES, BY BOROUGHES.

Manhattan.—Data include 1,612 cases in 1,590 families, as follows:

	Families.	Cases.	Per cent of total families.
1 case in family.....	1,569	1,569	98.7
2 cases in family.....	20	40	1.20
3 cases in family.....	1	3	.1
Total.....	1,590	1,612	100

Brooklyn.—Data include 3,959 cases in 3,808 families, as follows:

	Families.	Cases.	Per cent of total families.
1 case in family.....	3,675	3,675	96.52
2 cases in family.....	116	232	3.04
3 cases in family.....	16	48	.42
4 cases in family.....	1	4	.02
Total.....	3,808	3,959	100

The Bronx.—Data include 333 cases in 309 families, as follows:

	Families.	Cases.	Per cent of total families.
1 case in family.....	286	286	92.6
2 cases in family.....	22	44	7.1
3 cases in family.....	1	3	.3
Total.....	309	333	100

Queens.—Data include 844 cases in 810 families, as follows:

	Families.	Cases.	Per cent of total families.
1 case in family.....	777	777	95.9
2 cases in family.....	32	64	3.95
3 cases in family.....	1	3	.15
Total.....	810	844	100

Richmond.—Data include 252 cases in 231 families, as follows:

	Families.	Cases.	Per cent of total families.
1 case in family.....	214	214	92.6
2 cases in family.....	15	30	6.5
3 cases in family.....	1	3	.4
5 cases in family.....	1	5	.4
Total.....	231	252	99.9

NUMBER AND PERCENTAGE OF FAMILIES, BY BOROUGH, IN WHICH MORE THAN
1 CASE HAS OCCURRED.

Borough.	Families in which more than 1 case has occurred.	
	Number of families.	Per cent of total families.
Manhattan.....	21	1.3
Brooklyn.....	133	3.48
The Bronx.....	23	7.4
Queens.....	33	4.1
Richmond.....	17	7.4
Total for city.....	227	3.36

Most of the data in this brief report have been compiled from the records of the city department of health, and acknowledgment is made to the commissioner for the courtesy.